Department of Behavioral Health and Developmental Services Virginia SIS® Reassessment Request Instructions

This form is used to request a reassessment of the Supports Intensity Scale[®] (SIS[®]) for an individual currently enrolled in DD Waiver services. The form is completed by the assigned Community Services Board (CSB) and submitted to the Regional Supports Specialist (RSS).

- 1. The Support Coordinator (SC) completes the form and selects the appropriate category for reassessment.
 - a. The SC provides a brief description of reason for reassessment.
 - b. The SC reviews the required documentation for reassessment and submits it along with the SIS® Reassessment Request Form. (*Required documentation for each category may be found on the SIS® VA Reassessment Request Form dated 3/31/2020).
 - c. The SIS® Point Person at the CSB reviews entire submission to ensure accuracy.
- 2. The Point Person (or designee) submits the form and required documentation (via secure email) to the RSS.
- 3. The RSS reviews the full submission to ensure all required documentation is included. If the required documentation is not included in the submission, the request is **rejected**
 - a. Rejected:
 - i. RSS indicates the reason why, signs and returns the form to the CSB.
- 4. The RSS signs and submits the completed request to the SIS® Quality Manager for comprehensive review.
- 5. Following a comprehensive review of submitted documentation, the SIS® Quality Manager in coordination with the Regional Supports Unit Manager, makes a decision and both sign in agreement. The request is either:

a. Approved:

- i. The RSS notifies the requesting CSB of the outcome.
- ii. SIS^{\circledast} vendor is made aware of the need for a new SIS^{\circledast} via the SIS^{\circledast} Vendor Report
- iii. The assigned SIS® vendor requests respondent information from the SC and proceeds with scheduling the interview.

b. **Denied:**

i. The RSS notifies the requesting CSB of the outcome.